

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>my</i>		5/2/00
O.I.P.E. CLASSIFIER			1-10
FORMALITY REVIEW	5-11	7-534	9-13-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
1	5/2/00
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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